ij

ATRICIA LESHNOCK

Please type a plus sign (+) inside this box → +

(Typed or pricing name of period mailing perpend lea) PTO/SB/05 (4/98)

ATTUMPED THE PROPERTY OF THE PROPERTY OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number RDM98002 Attorney Docket No.

## UTILITY PATENT APPLICATION **TRANSMITTAL**

First Inventor or Application Identifier W.C. Yang et al IMPROVED FLUIDIZED BED REACTOR DESIGN

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Express Mail Label No.

| Ē   |  |                             | ATION ELEMENTS  |                        |           | ADDRESS TO BOX PATENT Application  |  |  |  |
|---|--|-----------------------------|---|------------------------|-----------|--|--|--|--|
| Sec   | MPEF   | chapter 600                 | concerning utility patent appl                                      | lication contents.     |           | Washington, DC 20231   |  |  |  |
| 1.  | X  |                             | smittal Form <i>(e.g., PTO/</i><br>priginal and a duplicate for fee | •                      | 5.        | (, pponosy   |  |  |  |
| 2.  | X  | Specification (preferred ar | on [Total<br>trangement set forth below)                            | Pages // ]             | 6.        | 6. Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary)  |  |  |  |
| i   |  |                             | re title of the Invention   |                        |           | a. Computer Readable Copy  |  |  |  |
| l   |  |                             | ferences to Related Application to Regarding Fed sponsories.        |                        |           | b. Paper Copy (identical to computer copy)   |  |  |  |
| l   |  |                             | e to Microfiche Appendix  |                        |           | c. Statement verifying identity of above copies  |  |  |  |
|   | - Background of the Invention  |                             |   |                        |           | ACCOMPANYING APPLICATION PARTS   |  |  |  |
| l   | - Brief Summary of the Invention                                     |                             |   |                        | 7         |  |  |  |  |
| l   | <ul> <li>Brief Description of the Drawings (if filed)</li> </ul>     |                             |   |                        | '         | Assignment Papers (cover sheet & document(s))  37 C.F.R.§3.73(b) Statement Power of  |  |  |  |
|   | - Detailed Description   |                             |   |                        | 8.        | (when there is an assignee) Attorney   |  |  |  |
|   | - Claim(s)   |                             |   |                        | 9.        | English Translation Document (if applicable)   |  |  |  |
| 3.  | •  |                             | of the Disclosure<br>(35 U.S.C. 113) [Total 8                       | Sheets 1               | 10.       | Information Disclosure Copies of IDS   |  |  |  |
| 4.  |  | or Declaration              |   | Pages 12               | 11.       | Statement (IDS)/PTO-1449  Citations  Preliminary Amendment   |  |  |  |
| ļ .   |  |                             | •   | , <u>194</u>           | 12.       | Return Receipt Postcard (MPEP 503)   |  |  |  |
|   | a. Newly executed (original or copy)                                 |                             |   |                        |           | (Should be specifically itemized)  |  |  |  |
|   |  |                             |   |                        |           | Statement filed in prior application   |  |  |  |
|   | i. <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting |                             |   |                        |           | Status still proper and desired   Certified Copy of Priority Document(s)   |  |  |  |
|   | inventor(s) named in the prior application,                          |                             |   |                        |           | (if foreign priority is claimed)   |  |  |  |
| see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). 15 Other   |  |                             |   |                        |           |  |  |  |  |
| * NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1:27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1:28); |  |                             |   |                        |           |  |  |  |  |
| 16  | . If a C   | CONTINUIN                   | IG APPLICATION, check a   | appropriate box, and : | supply th | the requisite information below and in a preliminary amendment:  |  |  |  |
|   |  | Continuation                |   | Continuation-in-part ( |           | of prior application No:/  |  |  |  |
| l _   | Prior  | application in              | formation: Examiner   |                        |           | Group / Art Unit:  |  |  |  |
| unc   | ler Box  | : 4b, is consi              | idered a part of the disclosu                                       | are of the accompan    | vina co   | prior application, from which an oath or declaration is supplied ontinuation or divisional application and is hereby incorporated by |  |  |  |
| refe  | erence.  | The incorporate             | oration can only be relied u  | pon when a portion     | has bee   | en inadvertently omitted from the submitted application parts.   |  |  |  |
|   |  |                             | 17.   | CORRESPOND             | NCE       | ADDRESS  |  |  |  |
|   | Cust   | tomer Numbe                 | er or Bar Code Label  | _                      |           | or Correspondence address below  |  |  |  |
| <u> </u>  |  | <del> </del>                |   | t Customer No. or Att  |           |  |  |  |  |
| Nai   | ne   | Wes                         | tinghouse Elec  | tric Compa             | ny L      | LC   |  |  |  |
|   | 4  | Law                         | Law Dept - IPS  |                        |           |  |  |  |  |
| Address   |  | P.0                         | P.O. Box 355  |                        |           |  |  |  |  |
| City  |  | Pit                         | tsburgh   | State                  | PA        | Zip Code 15230-0355  |  |  |  |
| Cou   | intry  | USA                         |   | Telephone              | 412       | 374-2282 Fax 412 374-3832  |  |  |  |
|   | Name   | (Print/Type)                | Joseph C. Spa   | dacene                 |           | Registration No. (Attorney/Agent) . 33,037   |  |  |  |
|   | Signa  | ture                        | Japuc S   | makene                 |           | Date 02-18-00  |  |  |  |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (12/99)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE ollection of information unless it displays a valid OMB control number Under the Paperwork Reduction Act of 1995, no persons are required to response

## FEE TRANSMITTAI

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(s) 730.00

|                      | Annadori dilicos it displays a valid OND Collifor Ildinoel. |  |  |  |  |  |
|----------------------|---|--|--|--|--|--|
| Complete if Known    |   |  |  |  |  |  |
| Application Number   | to be assigned  |  |  |  |  |  |
| Filing Date          | concurrently  |  |  |  |  |  |
| First Named Inventor | W.C. Yang et al   |  |  |  |  |  |
| Examiner Name        | to be assigned  |  |  |  |  |  |
| Group / Art Unit     | to be assigned  |  |  |  |  |  |
| Attorney Docket No.  | RDM98002  |  |  |  |  |  |

| METHOD OF PAYMENT (check one)  | FEE CALCULATION (continued)  |                |  |  |  |  |  |  |  |  |  |
|--|--|----------------|--|--|--|--|--|--|--|--|--|
| 1. The Commissioner is hereby authorized to charge indicated fees and credit any overgoments to:         | 3. ADDITIONAL FEES   |                |  |  |  |  |  |  |  |  |  |
| indicated fees and credit any overpayments to:   | Large Entity Small Entity Fee                        |                |  |  |  |  |  |  |  |  |  |
| Deposit<br>Account 50_09/7   | Code (\$) Code (\$) Fee Description Fe   | e Paid         |  |  |  |  |  |  |  |  |  |
| Account Number 50-0947   | 105 130 205 65 Surcharge - late filing fee or oath                                       |                |  |  |  |  |  |  |  |  |  |
| Deposit<br>Account Westinghouse Electric Co.   | 127 50 227 25 Surcharge - late provisional filing fee or cover sheet.                    |                |  |  |  |  |  |  |  |  |  |
| Name   | 139 130 139 130 Non-English specification  |                |  |  |  |  |  |  |  |  |  |
| Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17   | 147 2,520 147 2,520 For filing a request for reexamination                               |                |  |  |  |  |  |  |  |  |  |
| 2. Payment Enclosed:   | 112 920* 112 920* Requesting publication of SIR prior to Examiner action                 |                |  |  |  |  |  |  |  |  |  |
| Check Money Other  | 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action                |                |  |  |  |  |  |  |  |  |  |
| FEE CALCULATION  | 115 110 215 55 Extension for reply within first month                                    |                |  |  |  |  |  |  |  |  |  |
|  | 116 380 216 190 Extension for reply within second month                                  |                |  |  |  |  |  |  |  |  |  |
| 1. BASIC FILING FEE Large Entity Small Entity  | 117 870 217 435 Extension for reply within third month                                   |                |  |  |  |  |  |  |  |  |  |
| Fee Fee Fee Fee Description  | 118 1,360 218 680 Extension for reply within fourth month                                |                |  |  |  |  |  |  |  |  |  |
| Code (\$) Code (\$) Fee Paid  101 690 201 345 Utility filing fee   | 128 1,850 228 925 Extension for reply within fifth month                                 |                |  |  |  |  |  |  |  |  |  |
| 690  | 119 300 219 150 Notice of Appeal   |                |  |  |  |  |  |  |  |  |  |
| 106 310 206 155 Design filing fee 107 480 207 240 Plant filing fee                                       | 120 300 220 150 Filing a brief in support of an appeal                                   |                |  |  |  |  |  |  |  |  |  |
| 108 690 208 345 Reissue filing fee   | 121 260 221 130 Request for oral hearing   |                |  |  |  |  |  |  |  |  |  |
| 114 150 214 75 Provisional filing fee  | 138 1,510 138 1,510 Petition to institute a public use proceeding                        |                |  |  |  |  |  |  |  |  |  |
|  | 140 110 240 55 Petition to revive - unavoidable  |                |  |  |  |  |  |  |  |  |  |
| SUBTOTAL (1) (\$) 690  | 141 1,210 241 605 Petition to revive - unintentional                                     |                |  |  |  |  |  |  |  |  |  |
| 2. EXTRA CLAIM FEES  | 142 1,210 242 605 Utility issue fee (or reissue)   |                |  |  |  |  |  |  |  |  |  |
| Fee from<br>Ext <u>ra Claims below</u> Fee Paid  | 143 430 243 215 Design issue fee   |                |  |  |  |  |  |  |  |  |  |
| Total Claims 20 -20** = X = =  | 144 580 244 290 Plant issue fee  |                |  |  |  |  |  |  |  |  |  |
| Independent - 3** = X = X  | 122 130 122 130 Petitions to the Commissioner  |                |  |  |  |  |  |  |  |  |  |
| Multiple Dependent =   | 123 50 123 50 Petitions related to provisional applications                              |                |  |  |  |  |  |  |  |  |  |
| **or number previously paid, if greater; For Reissues, see below Large Entity Small Entity               | 126 240 126 240 Submission of Information Disclosure Stmt                                | <del> </del>   |  |  |  |  |  |  |  |  |  |
| Fee Fee Fee Fee Description Code (\$) Code (\$)  | 581 40 581 40 Recording each patent assignment per property (times number of properties) | 0.             |  |  |  |  |  |  |  |  |  |
| 103 18 203 9 Claims in excess of 20  | 146 690 246 345 Filing a submission after final rejection (37 CFR § 1.129(a))            | <del>-  </del> |  |  |  |  |  |  |  |  |  |
| 102 78 202 39 Independent claims in excess of 3<br>104 260 204 130 Multiple dependent claim, if not paid | 149 690 249 345 For each additional invention to be                                      | <del>-  </del> |  |  |  |  |  |  |  |  |  |
| 109 78 209 39 ** Reissue independent claims over original patent   | Other fee (specify)  | <del> </del>   |  |  |  |  |  |  |  |  |  |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent                                  | Other fee (specify)  |                |  |  |  |  |  |  |  |  |  |
|  |  |                |  |  |  |  |  |  |  |  |  |
| SUBTOTAL (2) (\$) - O - Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 730.00                        |  |                |  |  |  |  |  |  |  |  |  |
| SUBMITTED BY   | SUBMITTED BY Complete (if applicable)  |                |  |  |  |  |  |  |  |  |  |
| Name (PrintType) Joseph C. Spadacene   | Registration No. (Attorney/Agent) 33', 037 Telephone 412 374-22                          | 82             |  |  |  |  |  |  |  |  |  |
| Signature Jason C. Smakere   | Date 02-18-00  |                |  |  |  |  |  |  |  |  |  |
| WARNING:   |  |                |  |  |  |  |  |  |  |  |  |

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.